NJ Department of Labor & Workforce Development		Name of Employer			Year	Contra	ict No.	
Annual Ed	qual Pay Report							
for Qualifying Services  Other than Public Works Projects					hment Address ame as business address			
KEY A - Race	1.	2.		3. Demographics		4. Hours		5. Compensation
A = Asian			Sex	<u>Race</u>	Ethnicity	Non-Exempt	Exempt_	Pay Band No.
B = Black or			M = Male			Employees	Employees	See Key B - based
African American	Employee Name	Job Category	F = Female X = Non-Binary	See Key A	H = Hispanic N=Non-Hispanic	Total Hrs. Worked Annually	Est. Annual Hours  - See Instructions	on IRS form W-2, Box #1
I = Native Hawaiian or Pacific Islander	спіріоуее напе	Job Category	X = NOT-Billary	See Key A	N=Non-Hispanic	Annually	- See Instructions	VV-2, BOX #1
N = American Indian or Native Alaskan								
<b>W</b> = White								
M = 2 or More								
KEY B - Pay Bands								
<b>1</b> = \$19,239 and under								
<b>2</b> = \$19,240–\$24,439								
<b>3</b> = \$24,440–\$30,679								
<b>4</b> = \$30,680–\$38,999								
<b>5</b> = \$39,000–\$49,919								
<b>6</b> = \$49,920–\$62,919								<u>[</u>
<b>7</b> = \$62,920–80,079				_		_	_	
<b>8</b> = \$80,080–\$101,919								
<b>9</b> = \$101,920–\$128,959								
<b>10</b> = \$128,960–\$163,799							ĺ	

Check if additional sheets are used

Email completed form to equalpayact@dol.nj.gov

**11** = \$163,800–\$207,999 **12** = \$208,000 and over

MW-563 (12/18)